

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J.B.	20200	11-9-99
O.I.P.E. CLASSIFIER			10/11-15-99
FORMALITY REVIEW	CM	71632	11/17/99

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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Claim	Date
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52	3/28/02
53	4/6/02
54	4/21/02
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Claim	Date
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Original	
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111	3/28/02
112	4/6/02
113	4/21/02
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If more than 150 claims or 10 actions  
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